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PTO/SB/05 (03-01)

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02/27/02

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

7756XC

First Inventor

Robert Richard Dykstra

Assignee

The Procter & Gamble Company

Title

Stability Enhancing Formulation Components, Compositions And Laundry Methods Employing Same

Express Mail Label No.

ET194809018US

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

Box Patent ApplicationADDRESS TO: Assistant Commissioner for Patents
Washington, D.C. 20231

- | | |
|---|--|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i> | 6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 2. <input checked="" type="checkbox"/> Specification Total Pages [103] <i>(preferred arrangement set forth below)</i> | 7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> |
| - Descriptive Title of the Invention | a. <input type="checkbox"/> Computer Readable Form (CRF) |
| - Cross References to Related Applications | b. Specification Sequence Listing on: |
| - Statement Regarding Fed sponsored R&D | i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or |
| - Reference to sequence listing, a table, or a computer program listing appendix | ii. <input type="checkbox"/> Paper |
| - Background of the Invention | c. <input type="checkbox"/> Statement verifying identity of above copies |
| - Brief Summary of the Invention | |
| - Brief Description of the Drawings <i>(if filed)</i> | |
| - Detailed Description | |
| - Claim(s) | |
| - Abstract of the Disclosure | |
| 3. <input type="checkbox"/> Drawing(s) (35 USC §113) Total Sheets [] | |
| 4. Oath or Declaration Total pages [4] | |
| a. <input checked="" type="checkbox"/> Newly executed (original or copy) | 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) <i>(for continuation/divisional with Box 17 complete</i> | 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> |
| i. <input type="checkbox"/> DELETION OF INVENTORS Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.63(d)(2) and 1.33(b). | 10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> |
| 5. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR §1.76 | 11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations |
| 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR §1.76: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. PCT/US00/23319, filed 8/25/2000, which claims priority to application Nos. 60/151,172, filed 8/27/1999 and 60/151,216 filed 8/27/99. | 12. <input type="checkbox"/> Preliminary Amendment |
| | 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> |
| | 14. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> |
| | 15. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. |
| | 16. <input type="checkbox"/> Other: |

ACCOMPANYING APPLICATION PARTS

8. Assignment Papers (cover sheet & document(s))
9. 37 CFR 3.73(b) Statement Power of Attorney
(when there is an assignee)
10. English Translation Document *(if applicable)*
11. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations
12. Preliminary Amendment
13. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
14. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
15. Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
16. Other:

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR §1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No. PCT/US00/23319, filed 8/25/2000, which claims priority to application Nos. 60/151,172, filed 8/27/1999 and 60/151,216 filed 8/27/99.Prior application information: Examiner: _____ Group/Art Unit: _____
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**19. CORRESPONDENCE ADDRESS** Customer Number

(Insert Customer No. here)

27752

| | | | |
|-------------------|----------------------|-----------------------------------|---------|
| Name (Print/Type) | C. Brant Cook | Registration No. (Attorney/Agent) | 39,151 |
| Signature | <i>C. Brant Cook</i> | Date | 2/27/02 |

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(Revised for P&G use 12/7/01)

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

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| FEE TRANSMITTAL for FY 2002 <small>Patent fees are subject to annual revision.</small> | | Complete if Known | |
| | | <i>Application Number</i> | To be assigned |
| | | <i>Confirmation Number</i> | |
| | | <i>Filing Date</i> | February 27, 2002 |
| | | <i>First Named Inventor</i> | Robert Richard Dykstra |
| | | <i>Examiner Name</i> | |
| <i>Group/Art Unit</i> | | | |
| TOTAL AMOUNT OF PAYMENT | (\$) 1256.00 | <i>Attorney Docket No.</i> | 7756XC |

| METHOD OF PAYMENT (check one) | | | FEES CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. [X] The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number 16-2480 Deposit Account Name The Procter & Gamble Company [X] Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17 | | | 3. ADDITIONAL FEES <table border="0"> <thead> <tr> <th>Code (\$)</th> <th><u>Fee Description</u></th> <th><u>Fee Paid</u></th> </tr> </thead> <tbody> <tr><td>105 130</td><td>Surcharge-late filing fee or oath</td><td><input type="checkbox"/></td></tr> <tr><td>127 50</td><td>Surcharge-late provisional filing fee or cover sheet</td><td><input type="checkbox"/></td></tr> <tr><td>139 130</td><td>Non-English specification</td><td><input type="checkbox"/></td></tr> <tr><td>147 2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td><input type="checkbox"/></td></tr> <tr><td>112 920*</td><td>Requesting publication of SIR prior to Examiner's action</td><td><input type="checkbox"/></td></tr> <tr><td>113 1,840*</td><td>Requesting publication of SIR after Examiner's action</td><td><input type="checkbox"/></td></tr> <tr><td>115 110</td><td>Extension for reply within 1st month</td><td><input type="checkbox"/></td></tr> <tr><td>116 400</td><td>Extension for reply within 2nd month</td><td><input type="checkbox"/></td></tr> <tr><td>117 920</td><td>Extension for reply within 3rd month</td><td><input type="checkbox"/></td></tr> <tr><td>118 1,440</td><td>Extension for reply within 4th month</td><td><input type="checkbox"/></td></tr> <tr><td>128 1,960</td><td>Extension for reply within 5th month</td><td><input type="checkbox"/></td></tr> <tr><td>119 320</td><td>Notice of Appeal</td><td><input type="checkbox"/></td></tr> <tr><td>120 320</td><td>Filing a brief in support of an appeal</td><td><input type="checkbox"/></td></tr> <tr><td>121 280</td><td>Request for oral hearing</td><td><input type="checkbox"/></td></tr> <tr><td>138 1,510</td><td>Petition to institute a public use proceeding</td><td><input type="checkbox"/></td></tr> <tr><td>140 110</td><td>Petition to revive – unavoidable</td><td><input type="checkbox"/></td></tr> <tr><td>141 1,280</td><td>Petition to revive - unintentional</td><td><input type="checkbox"/></td></tr> <tr><td>142 1,280</td><td>Utility issue fee (or reissue)</td><td><input type="checkbox"/></td></tr> <tr><td>143 460</td><td>Design issue fee</td><td><input type="checkbox"/></td></tr> <tr><td>122 130</td><td>Petitions to the Commissioner</td><td><input type="checkbox"/></td></tr> <tr><td>123 50</td><td>Petitions related to provisional applications</td><td><input type="checkbox"/></td></tr> <tr><td>126 180</td><td>Submission of Information Disclosure Statement</td><td><input type="checkbox"/></td></tr> <tr><td>146 740</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td><input type="checkbox"/></td></tr> <tr><td>149 740</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td><input type="checkbox"/></td></tr> <tr><td>179 740</td><td>Request for Continued Examination (RCE)</td><td><input type="checkbox"/></td></tr> <tr><td>169 900</td><td>Request for expedited examination of a design application</td><td><input type="checkbox"/></td></tr> <tr><td>091 1280</td><td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td><td><input type="checkbox"/></td></tr> <tr><td colspan="3">Other fee (specify) _____ <input type="checkbox"/></td></tr> <tr><td colspan="3">Other fee (specify) _____ <input type="checkbox"/></td></tr> </tbody> </table> | | | Code (\$) | <u>Fee Description</u> | <u>Fee Paid</u> | 105 130 | Surcharge-late filing fee or oath | <input type="checkbox"/> | 127 50 | Surcharge-late provisional filing fee or cover sheet | <input type="checkbox"/> | 139 130 | Non-English specification | <input type="checkbox"/> | 147 2,520 | For filing a request for <i>ex parte</i> reexamination | <input type="checkbox"/> | 112 920* | Requesting publication of SIR prior to Examiner's action | <input type="checkbox"/> | 113 1,840* | Requesting publication of SIR after Examiner's action | <input type="checkbox"/> | 115 110 | Extension for reply within 1 st month | <input type="checkbox"/> | 116 400 | Extension for reply within 2 nd month | <input type="checkbox"/> | 117 920 | Extension for reply within 3 rd month | <input type="checkbox"/> | 118 1,440 | Extension for reply within 4 th month | <input type="checkbox"/> | 128 1,960 | Extension for reply within 5 th month | <input type="checkbox"/> | 119 320 | Notice of Appeal | <input type="checkbox"/> | 120 320 | Filing a brief in support of an appeal | <input type="checkbox"/> | 121 280 | Request for oral hearing | <input type="checkbox"/> | 138 1,510 | Petition to institute a public use proceeding | <input type="checkbox"/> | 140 110 | Petition to revive – unavoidable | <input type="checkbox"/> | 141 1,280 | Petition to revive - unintentional | <input type="checkbox"/> | 142 1,280 | Utility issue fee (or reissue) | <input type="checkbox"/> | 143 460 | Design issue fee | <input type="checkbox"/> | 122 130 | Petitions to the Commissioner | <input type="checkbox"/> | 123 50 | Petitions related to provisional applications | <input type="checkbox"/> | 126 180 | Submission of Information Disclosure Statement | <input type="checkbox"/> | 146 740 | Filing a submission after final rejection (37 CFR § 1.129(a)) | <input type="checkbox"/> | 149 740 | For each additional invention to be examined (37 CFR § 1.129(b)) | <input type="checkbox"/> | 179 740 | Request for Continued Examination (RCE) | <input type="checkbox"/> | 169 900 | Request for expedited examination of a design application | <input type="checkbox"/> | 091 1280 | Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) | <input type="checkbox"/> | Other fee (specify) _____ <input type="checkbox"/> | | | Other fee (specify) _____ <input type="checkbox"/> | | |
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| 105 130 | Surcharge-late filing fee or oath | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 127 50 | Surcharge-late provisional filing fee or cover sheet | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 139 130 | Non-English specification | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 147 2,520 | For filing a request for <i>ex parte</i> reexamination | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 112 920* | Requesting publication of SIR prior to Examiner's action | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 113 1,840* | Requesting publication of SIR after Examiner's action | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 115 110 | Extension for reply within 1 st month | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 116 400 | Extension for reply within 2 nd month | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 117 920 | Extension for reply within 3 rd month | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 118 1,440 | Extension for reply within 4 th month | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 128 1,960 | Extension for reply within 5 th month | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 119 320 | Notice of Appeal | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 120 320 | Filing a brief in support of an appeal | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 121 280 | Request for oral hearing | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 138 1,510 | Petition to institute a public use proceeding | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 140 110 | Petition to revive – unavoidable | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 141 1,280 | Petition to revive - unintentional | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 142 1,280 | Utility issue fee (or reissue) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 143 460 | Design issue fee | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 122 130 | Petitions to the Commissioner | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 123 50 | Petitions related to provisional applications | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 126 180 | Submission of Information Disclosure Statement | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 146 740 | Filing a submission after final rejection (37 CFR § 1.129(a)) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 149 740 | For each additional invention to be examined (37 CFR § 1.129(b)) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 179 740 | Request for Continued Examination (RCE) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 169 900 | Request for expedited examination of a design application | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 091 1280 | Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify) _____ <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other fee (specify) _____ <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. BASIC FILING FEE – Large Entity <table border="0"> <thead> <tr> <th>Code (\$)</th> <th><u>Fee Description</u></th> <th><u>Fee Paid</u></th> </tr> </thead> <tbody> <tr><td>101 740</td><td>Utility filing fee</td><td>[740.00]</td></tr> <tr><td>106 330</td><td>Design filing fee</td><td><input type="checkbox"/></td></tr> <tr><td>108 740</td><td>Reissue filing fee</td><td><input type="checkbox"/></td></tr> <tr><td>114 160</td><td>Provisional filing fee</td><td><input type="checkbox"/></td></tr> </tbody> </table> | | | Code (\$) | <u>Fee Description</u> | <u>Fee Paid</u> | 101 740 | Utility filing fee | [740.00] | 106 330 | Design filing fee | <input type="checkbox"/> | 108 740 | Reissue filing fee | <input type="checkbox"/> | 114 160 | Provisional filing fee | <input type="checkbox"/> | * Reduced by Basic Filing Fee Paid SUBTOTAL(3) (\$) [] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Code (\$) | <u>Fee Description</u> | <u>Fee Paid</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 101 740 | Utility filing fee | [740.00] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 106 330 | Design filing fee | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 108 740 | Reissue filing fee | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 114 160 | Provisional filing fee | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. EXTRA CLAIM FEES – Large Entity <table border="0"> <thead> <tr> <th></th> <th>Extra <u>Claims</u></th> <th>Fee from <u>Below</u></th> <th>Fee <u>Paid</u></th> </tr> </thead> <tbody> <tr><td>Total Claims</td><td>[44] - 20** = [24]</td><td>x [18]</td><td>= [432.00]</td></tr> <tr><td>Independent Claims</td><td>[4] - 3** = [1]</td><td>x [84]</td><td>= [84.00]</td></tr> <tr><td>Multiple Dependent</td><td></td><td>[]</td><td>= []</td></tr> </tbody> </table> <p>** or number previously paid, if greater; For Reissues, see below</p> <table border="0"> <thead> <tr> <th>Code (\$)</th> <th><u>Fee Description</u></th> </tr> </thead> <tbody> <tr><td>103 18</td><td>Claims in excess of 20</td></tr> <tr><td>102 84</td><td>Independent claims in excess of 3</td></tr> <tr><td>104 280</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>109 84</td><td>**Reissue independent claims over original patent</td></tr> <tr><td>110 18</td><td>**Reissue claims in excess of 20 & over original patent</td></tr> </tbody> </table> | | | | Extra <u>Claims</u> | Fee from <u>Below</u> | Fee <u>Paid</u> | Total Claims | [44] - 20** = [24] | x [18] | = [432.00] | Independent Claims | [4] - 3** = [1] | x [84] | = [84.00] | Multiple Dependent | | [] | = [] | Code (\$) | <u>Fee Description</u> | 103 18 | Claims in excess of 20 | 102 84 | Independent claims in excess of 3 | 104 280 | Multiple dependent claim, if not paid | 109 84 | **Reissue independent claims over original patent | 110 18 | **Reissue claims in excess of 20 & over original patent | SUBTOTAL (2) (\$)[516.00] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Extra <u>Claims</u> | Fee from <u>Below</u> | Fee <u>Paid</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims | [44] - 20** = [24] | x [18] | = [432.00] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims | [4] - 3** = [1] | x [84] | = [84.00] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent | | [] | = [] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Code (\$) | <u>Fee Description</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 103 18 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 102 84 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 104 280 | Multiple dependent claim, if not paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 109 84 | **Reissue independent claims over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 110 18 | **Reissue claims in excess of 20 & over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| SUBMITTED BY | | Complete (if applicable) | | |
|-------------------|----------------------|--------------------------------------|--------|--------------------------|
| Name (Print/Type) | C. Brant Cook | Registration No. (Attorney/Agent) | 39,151 | Telephone (513) 627-2013 |
| Signature | <i>C. Brant Cook</i> | | | Date 2/27/02 |

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